

County: Milwaukee
 BEL AIR HEALTH CARE & ALZHEIMER'S CENTER
 9350 WEST FOND DU LAC AVENUE
 MILWAUKEE 53225 Phone: (414) 438-4360

Facility ID: 1480

Page 1

Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 260
 Total Licensed Bed Capacity (12/31/01): 260
 Number of Residents on 12/31/01: 237

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 247

Corporation
 Skilled

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		27.8
Supp. Home Care-Personal Care	No					1 - 4 Years		46.0
Supp. Home Care-Household Services	No	Developmental Disabilities	2.1	Under 65	18.6	More Than 4 Years		26.2
Day Services	No	Mental Illness (Org./Psy)	38.4	65 - 74	19.0			-----
Respite Care	No	Mental Illness (Other)	7.6	75 - 84	28.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	29.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.4	95 & Over	5.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	6.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.5		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	5.5	65 & Over	81.4	-----		
Transportation	No	Cerebrovascular	3.8		-----	RNs		15.3
Referral Service	No	Diabetes	7.2	Sex	%	LPNs		14.1
Other Services	No	Respiratory	0.8		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	21.9	Male	35.4	Aides, & Orderlies		
Mentally Ill	No		-----	Female	64.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	2	28.6	251	12	6.2	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	14	5.9
Skilled Care	5	71.4	251	164	84.5	155	3	100.0	115	27	96.4	172	4	100.0	155	0	0.0	0	203	85.7
Intermediate	---	---	---	17	8.8	155	0	0.0	0	1	3.6	172	0	0.0	0	1	100.0	166	19	8.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	0.5	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.4
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		194	100.0		3	100.0		28	100.0		4	100.0		1	100.0		237	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	15.5	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	5.4	Bathing	3.8	54.9	41.4	237
Other Nursing Homes	8.9	Dressing	13.5	46.8	39.7	237
Acute Care Hospitals	61.3	Transferring	34.6	35.9	29.5	237
Psych. Hosp. -MR/DD Facilities	4.8	Toilet Use	21.5	34.6	43.9	237
Rehabilitation Hospitals	0.0	Eating	45.6	29.5	24.9	237
Other Locations	4.2	*****				
Total Number of Admissions	168	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.4	Receiving Respiratory Care	8.9	
Private Home/No Home Health	18.2	Occ/Freq. Incontinent of Bladder	65.8	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	14.4	Occ/Freq. Incontinent of Bowel	62.0	Receiving Suctioning	0.0	
Other Nursing Homes	11.2	Mobility		Receiving Ostomy Care	5.1	
Acute Care Hospitals	2.1			Receiving Tube Feeding	5.1	
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	2.1	Receiving Mechanically Altered Diets	46.8	
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	3.7			Have Advance Directives	48.5	
Deaths	50.3	With Pressure Sores	5.5	Medications		
Total Number of Discharges (Including Deaths)	187	With Rashes	5.5	Receiving Psychoactive Drugs	48.5	

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 200+ Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	80.5	77.1	1.04	80.2	1.00	82.7	0.97	84.6	0.95
Current Residents from In-County	82.7	82.7	1.00	83.3	0.99	85.3	0.97	77.0	1.07
Admissions from In-County, Still Residing	33.9	19.1	1.77	27.4	1.24	21.2	1.60	20.8	1.63
Admissions/Average Daily Census	68.0	173.2	0.39	94.3	0.72	148.4	0.46	128.9	0.53
Discharges/Average Daily Census	75.7	173.8	0.44	98.8	0.77	150.4	0.50	130.0	0.58
Discharges To Private Residence/Average Daily Census	24.7	71.5	0.35	31.6	0.78	58.0	0.43	52.8	0.47
Residents Receiving Skilled Care	91.6	92.8	0.99	89.7	1.02	91.7	1.00	85.3	1.07
Residents Aged 65 and Older	81.4	86.6	0.94	90.1	0.90	91.6	0.89	87.5	0.93
Title 19 (Medicaid) Funded Residents	81.9	71.1	1.15	71.6	1.14	64.4	1.27	68.7	1.19
Private Pay Funded Residents	11.8	13.9	0.85	19.1	0.62	23.8	0.50	22.0	0.54
Developmentally Disabled Residents	2.1	1.3	1.57	0.8	2.53	0.9	2.24	7.6	0.28
Mentally Ill Residents	46.0	32.5	1.41	35.4	1.30	32.2	1.43	33.8	1.36
General Medical Service Residents	21.9	20.2	1.08	20.3	1.08	23.2	0.95	19.4	1.13
Impaired ADL (Mean)	56.1	52.6	1.07	51.8	1.08	51.3	1.09	49.3	1.14
Psychological Problems	48.5	48.8	1.00	47.7	1.02	50.5	0.96	51.9	0.94
Nursing Care Required (Mean)	9.6	7.3	1.31	7.3	1.31	7.2	1.33	7.3	1.31